Best Available Copy

Effective October 1, 2001

| Application or | Docket | Numbe |
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10/055230

| CLAIMS AS FILED - PART I (Column 1) | | | | | | SMALL ENTITY TYPE | | OTHER THAN OR SMALL ENTITY | | | | |
|--|---------------------|---|-----------------|----------------------|-------------------------------------|--|-------|----------------------------|------------------------|-------|---------------------|------------------------|
| TOTAL CLAIMS | | 7 | | | | ſ | RATE | FEE | | RATE | FEE | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | BASIC FEE | 370.00 | OR | BASIC FEE | 740.00 |
| TOTAL CHARGEABLE CLAIMS O mir | | | min | us 20= | 0= * Ø | | | X\$ 9= | | OR | X\$18= | |
| INDEPENDENT CLAIMS minus 3 = | | | * Ø | | | X42= | | OR | X84= | | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | Ī | +140= | | OR | +280= | | |
| * If the difference in column 1 is less than zero, ente | | | r "0" in co | olumn 2 | L | TOTAL | 370 | OR | TOTAL | | | |
| CLAIMS AS AMENDED - PAR' (Column 1) (Colum | | | | | | (Column 3) | | SMALL E | NTITY | OR | OTHER SMALL | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGI NUN PREVI | HEST MBER OUSLY FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| DME | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| ME | Independent | * | Minus | *** | - 0. 4.14 | = | | X42= | | OR | X84= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CI | | | | | | | | +140= | | OR | +280= | |
| | | | | | | | L | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | | ımn 2) | (Column 3) | | | | _ | | |
| NT B | | CLAIMS REMAINING AFTER AMENDMENT | | NUI PREV | HEST MBER YOUSLY D FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| AMENDMENT | Independent | * | Minus | *** | IT OL AINA | <u> </u> | 4 | X42= | | OR | X84= | |
| | FIRST PRESE | NTATION OF M | OLTIPLE DE | PENDER | NI CLAIM | | | +140= | | OR | +280= | |
| | | | | | | | l | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | | umn 2) | (Column 3) | | | | _ | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | PRE | GHEST IMBER VIOUSLY ID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| MARY. | Independent | * | Minus | *** | NIT OL ALL | = | 4 | X42= | | OR | X84= | |
| | FIRST PRES | ENTATION OF I | MULTIPLE DE | PENDE | NI CLAIN | | ل | +140= | | OR | +280= | |
| , | If the entry in col | umn 1 is less than | the entry in co | lumn 2, w | rite "0" in co | olumn 3. | " | TOTAL | | OR | TOTA | |
| ** If the entry in Column 1's less than 20, enter "20." ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |